## **SCHEDULE A-P ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19723 / 31528 (check only one) 16 X 17a 17b 17c 18 17d 19a 19b

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NAME OF COMMITTEE (In Full)

FEC ID number of contributing

В.

CARSON AMERICA		
A. Full Name (Last, First, Middle Initial) NEIL NORTON		
Mailing Address 6634 WINDOW ROCK LANE		
City	State	Zip Code
MORRISON	CO	80465-9641

Transacti	on ID : SAT	7.930292	
Date of I	Receipt		
M M	/ D D	/ Y Y Y	ľ
4.4	4.4	2045	

CONTRIBUTION

C federal political committee. Name of Employer Occupation DENTIST COMFORT DENTAL, INC Receipt For: 2016 Election Cycle-to-Date ▼ | Primary General Other (specify)  $\blacktriangledown$ 250.00

An	nour	nt of	Ea	ch F	Rece	ipt	this	Period	
Г			7					250.00	

Full Name (Last, First, Middle Initial) MR. ROBERT P. NORTON			Transaction ID  Date of Receip
Mailing Address 877 DOGWOOD DELL LANE			12 D
City MIDLOTHIAN	State VA	Zip Code 23113-6389	
FEC ID number of contributing federal political committee.	С		CONTRIBUTION

Date of Receipt					
12 /	15	2015			

Transaction ID: SA17.1060750

MIDLOTHIAN	VA	23113-0309
FEC ID number of contributing federal political committee.	С	
Name of Employer INFORMATION REQUESTED PER BEST	Occupation INFORMAT	1 ION REQUESTED PER BEST
Receipt For: 2016  Primary  General		ycle-to-Date
Other (specify) ▼		500.00
	1	

Period	this	eipt	Rece	Each	of	nount	An
500.00				-			Т
	_	-9		9			

Full Name (Last, First, Middle Initial) TED NORTON		Transaction ID : Date of Receipt
Mailing Address 8636 GLADES COURT		12 16
City	State Zip Code	
MONTGOMERY	AL 36117-7552	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each
Name of Employer	Occupation	7 thouse of Each
KEVIMBACT SALES	CONCLUTANT	

Date of	Date of neceipt					
M	/	D D	/	YYYY		
12		16		2015		

Transaction ID: SA17.1054689

EC ID number of contributing ederal political committee.	С
lame of Employer (EYIMPACT SALES	Occupation CONSULTANT
Receipt For: 2016  Primary General  Other (specify)	Election Cycle-to-Date  250.00

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Amount	of Ea	ch Red	ceipt th	is Per	iod
					25.00
	7		7		

Subtotal Of Receipts This Page (optional)	Ξ		,	I	Ι	,	Ξ	77	75.00	)
Total This Period (last page this line number only)	-	_	7	_	_	7	_	-	-	1